

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC

ADDRESS (number and street) ▼

201 Colorado Place

☐ Check if different than previously reported. (ACC)

Arcadia

CA

91007

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00375154

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☒ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

04

01

2016

06

30

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David L Gould

Signature of Treasurer

David L Gould

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

07

15

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

## CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">4431.27</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">3401.59</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">16000.61</span>	<span style="border: 1px solid black; padding: 2px;">16001.14</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">19402.20</span>	<span style="border: 1px solid black; padding: 2px;">20432.41</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">15020.87</span>	<span style="border: 1px solid black; padding: 2px;">16051.08</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">4381.33</span>	<span style="border: 1px solid black; padding: 2px;">4381.33</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y Y  
04 01 2016

To:

M M / D D / Y Y Y Y Y Y  
06 30 2016

**I. Receipts**

**COLUMN A**  
**Total This Period**

**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

8500.00

8500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

8500.00

8500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

8500.00

8500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

7500.61

7501.14

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

16000.61

16001.14

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

16000.61

16001.14

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7520.87	7520.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7520.87	7520.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	5000.00	6030.21
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15020.87	16051.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15020.87	16051.08

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8500.00	8500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8500.00	8500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	7520.87	7520.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	7520.87	7520.87

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Richard Barton**

Mailing Address 845 N. Euclid

City State Zip Code  
 Ontario CA 91762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RICHARD BARTON ENTERPRISES

Occupation  
 Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : INCA538**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Joe Daehling**

Mailing Address 10045 Front Line Rd.

City State Zip Code  
 Elk Grove CA 95624

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Joe Daehling

Occupation  
 Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : INCA536**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bruce Headley**

Mailing Address 269 W Norman Ave

City State Zip Code  
 Arcadia CA 91007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Old English Rancho

Occupation  
 Breeder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : NONA543**

Amount of Each Receipt this Period

500.00

☐ Memo Item

IN KIND Stallion Season Auction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. John R. Lanza**

Mailing Address 4945 Rancho Verde Tr.

City	State	Zip Code
San Diego	CA	92130

FEC ID number of contributing federal political committee.

C

Name of Employer

John R. Lanza

Occupation

Farmer

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

**Transaction ID : INCA537**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Philip Lebherz**

Mailing Address 1600 W. Hillside Blvd.

City	State	Zip Code
San Mateo	CA	94402

FEC ID number of contributing federal political committee.

C

Name of Employer

Premier Thoroughbreds

Occupation

Thoroughbred Breeders

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

**Transaction ID : NONA540**

Amount of Each Receipt this Period

3000.00

☐ Memo Item

IN KIND Stallion Season Auction

Full Name (Last, First, Middle Initial)

**C. Antone Metaxas**

Mailing Address 28 Olive Ave

City	State	Zip Code
Larkspur	CA	94939

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacific Maritime Association

Occupation

Longshoreman

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

**Transaction ID : INCA533**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 17

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Alex Paszkeicz**

Mailing Address 1353 Franchere Way

City State Zip Code  
 Sunnyvale CA 94087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Horseman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : NONA539**

Amount of Each Receipt this Period

800.00

☐ Memo Item

IN KIND Stallion Season Auction

Full Name (Last, First, Middle Initial)

**B. Heinz Steinman**

Mailing Address 5797 Cedar Street

City State Zip Code  
 Wrightwood CA 92397

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : NONA541**

Amount of Each Receipt this Period

2200.00

☐ Memo Item

IN KIND Stallion Season Auction

Full Name (Last, First, Middle Initial)

**c. Charlene H. Tenbrink**

Mailing Address 5340 Thissell Rd.

City State Zip Code  
 Winters CA 90504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : INCA535**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3050.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 17  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Pamela Ziebarth**

Mailing Address 33207 Paseo Cerveza

City	State	Zip Code
San Juan Capistran	CA	92675

FEC ID number of contributing federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 25 / 2016

Transaction ID : NONA542

Amount of Each Receipt this Period

1000.00

☐ Memo Item

IN KIND Stallion Season Auction

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

8500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 10 OF 17  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Citibank**

Mailing Address 880 W Duarte Rd

City	State	Zip Code
Arcadia	CA	91007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2016

**Transaction ID : INCA560**

Amount of Each Receipt this Period

0.19

☐ Memo Item

INTEREST

Full Name (Last, First, Middle Initial)

**B. Citibank**

Mailing Address 880 W Duarte Rd

City	State	Zip Code
Arcadia	CA	91007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : INCA554**

Amount of Each Receipt this Period

0.14

☐ Memo Item

INTEREST

Full Name (Last, First, Middle Initial)

**C. Josue Arellano**

Mailing Address 1577 Country Vistas Ln.

City	State	Zip Code
Bonita	CA	91902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Horseman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

**Transaction ID : INCA546**

Amount of Each Receipt this Period

2200.00

☐ Memo Item

Stallion Season Auction

**SUBTOTAL** of Receipts This Page (optional)..... ►

2200.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Chris Campbell**

Mailing Address 2337 Blake St.

City State Zip Code  
 San Bernardino CA 92407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Horseman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : INCA548**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Stallion Season Auction

Full Name (Last, First, Middle Initial)

**B. John Harris**

Mailing Address 27366 W. Oakland Ave.

City State Zip Code  
 Coalinga CA 93210

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Harris Ranch

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : INCA547**

Amount of Each Receipt this Period

500.00

☐ Memo Item

Stallion Season Auction

Full Name (Last, First, Middle Initial)

**C. Neale Jenson**

Mailing Address 1244 Garfield St.

City State Zip Code  
 Enumclaw WA 98022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Horseman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016

**Transaction ID : INCA544**

Amount of Each Receipt this Period

800.00

☐ Memo Item

Stallion Season Auction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 17

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Lu Thomas**

Mailing Address P.O. Box 185

City State Zip Code  
Trail OR 97541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self Employed

Horseman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 25 / 2016

**Transaction ID : INCA545**

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Stallion Season Auction

Full Name (Last, First, Middle Initial)

**B. Citibank**

Mailing Address 880 W Duarte Rd

City State Zip Code  
Arcadia CA 91007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1.14

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

**Transaction ID : INCA549**

Amount of Each Receipt this Period

0.28

☐ Memo Item

INTEREST

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.28

7500.61

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC

 Memo Item

MM / DD / YYYY

10.21

 Memo Item

500.00

 Memo Item

520.21

FEC Schedule B (Form 3X) Rev. 12/2015

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 17

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Philip Lebherz**

Mailing Address 1600 W. Hillside Blvd.

City San Mateo      State CA      Zip Code 94402

Purpose of Disbursement  
IN KIND Stallion Season Auction

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      25      2016
**Transaction ID : NONB540**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Alex Paszkeicz**

Mailing Address 1353 Franchere Way

City Sunnyvale      State CA      Zip Code 94087

Purpose of Disbursement  
IN KIND Stallion Season Auction

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      25      2016
**Transaction ID : NONB539**

Amount of Each Disbursement this Period

800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Heinz Steinman**

Mailing Address 5797 Cedar Street

City Wrightwood      State CA      Zip Code 92397

Purpose of Disbursement  
IN KIND Stallion Season Auction

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      25      2016
**Transaction ID : NONB541**

Amount of Each Disbursement this Period

2200.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. HORSE PAC**

Mailing Address 2525 Harrodsburg Rd.

City	State	Zip Code
Lexington	KY	40504

Purpose of Disbursement  
Contribution

Candidate Name

**HORSE PAC**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2016

**Transaction ID : EXPB532**

Amount of Each Disbursement this Period

2500.00
---------

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.00
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2500.00
---------



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**CALIFORNIA THOROUGHBRED BREEDERS ASSOCIATION FEDERAL PAC**

Full Name (Last, First, Middle Initial)

**A. Hall For Congress**

Mailing Address 249 E. Ocean Blvd. Ste 685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement  
Contribution

011

Candidate Name

**Isadore Hall**Category/  
Type
 Office Sought: ☒ House  
☐ Senate  
☐ President

 Disbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 44

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

**Transaction ID : EXPB530**

Amount of Each Disbursement this Period

2500.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hall For Congress**

Mailing Address 249 E. Ocean Blvd. Ste 685

City	State	Zip Code
Long Beach	CA	90802

Purpose of Disbursement  
Contribution

011

Candidate Name

**Isadore Hall**Category/  
Type
 Office Sought: ☒ House  
☐ Senate  
☐ President

 Disbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 44

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2016

**Transaction ID : EXPB531**

Amount of Each Disbursement this Period

2500.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

 Office Sought: ☐ House  
☐ Senate  
☐ President

 Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

5000.00